

QUALITY INDICATORS FOR INFECTION PREVENTION AND CONTROL IN ACUTE CARE HOSPITALS

Supplement report 2023

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As our name suggests, science and health are central to our mission. Sciensano's strength and uniqueness lie within the holistic and multidisciplinary approach to health. More particularly we focus on the close and indissoluble interconnection between human and animal health and their environment (the "One health" concept). By combining different research perspectives within this framework, Sciensano contributes in a unique way to everybody's health.

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Epidemiology and public health - Healthcare-associated infections and antimicrobial resistance
Indicators for infection prevention and control

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RESULTS ON REGIONAL LEVEL

The median and range of the quality score of the various indicator groups and the total quality score, as well as the percentage of hospitals per quality class at the regional level, are presented in the report 'Indicators for infection prevention and control in acute care hospitals'. In this supplement, the percentage of hospitals complying with each individual indicator is shown per region (Table 1 to 9).

Differences can be seen between the regions for a number of indicators. For example, in Brussels, more training hours are recorded by the IPC team for hospital staff than in Flanders and Wallonia (Table 3). Also, the staff vaccination rates for influenza are higher in Flemish hospitals compared to Walloon et Brussels hospitals in 2022 (Table 7). However, the participation in the point prevalence study related to health care associated infections and antimicrobial use rates have increased in all 3 regions compared to previous years. (Table 6).

Table 1 • Proportion (%) of Belgian hospitals meeting each individual organisation indicator, regional level, 2015 – 2022

Indicator Description	Brussels									Flanders							Wallonia							
	2015 n=12	2016 n=12	2017 n=12	2018 n=12	2019 n=12	2020 n=6	2021 n=7	2022 n=7	2015 n=54	2016 n=54	2017 n=54	2018 n=53	2019 n=51	2020 n=41	2021 n=41	2022 n=37	2015 n=37	2016 n=37	2017 n=37	2018 n=37	2019 n=35	2020 n=26	2021 n=24	2022 n=25
Presence of a general long-term strategic plan (3-5 years) for IPC, approved by the IPC committee	83	100	100	100	100	83	86	100	100	100	98	96	100	98	98	97	97	100	100	100	100	100	100	96
The general strategic plan for IPC is integrated in the strategic plan of the hospital	67	83	92	75	75	50	57	57	76	87	89	89	100	98	95	95	62	65	81	76	80	81	83	76
The number of meetings for the IPC committee ≥4 per year	100	100	100	100	100	100	86	100	100	98	100	98	100	78	95	100	100	97	100	97	100	73	92	92
Presence of a detailed action plan for IPC, approved by the IPC committee	92	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	95	97	100	95	97	92	96	96
Presence of an annual report, approved by the IPC committee	100	192	100	100	100	100	100	100	100	100	100	100	98	93	98	100	100	100	100	100	100	100	100	92
The IPC nurse(s) is/are part of the nursing middle management	100 ¹	100 ¹	92	92	83	83	86	100	91 ¹	94	93	94	96	95	95	92	97 ¹	95 ¹	92	95	97	96	88	92
Mean proportion	90	96	97	95	93	86	86	93	95	97	97	96	99	94	97	97	92	92	96	94	96	90	93	91

n, number of hospitals; IPC, infection prevention and control

¹in 2013, 2015 and 2016 only one IPC nurse had to be a member of the nursing middle management

Table 2 • Proportion (%) of Belgian hospitals meeting each individual resource indicator, stratified by regional level, 2015 – 2022

Indicator Description	Brussels									Flanders							Wallonia							
	2015 n=12	2016 n=12	2017 n=12	2018 n=12	2019 n=12	2020 n=6	2021 n=7	2022 n=7	2015 n=54	2016 n=54	2017 n=54	2018 n=53	2019 n=51	2020 n=41	2021 n=41	2022 n=37	2015 n=37	2016 n=37	2017 n=37	2018 n=37	2019 n=35	2020 n=26	2021 n=26	2022 n=25
The effective number of IPC physicians ≥ 90% of the funded number (expressed in number of FTE)	83	75	75	83	92	100	86	86	91	98	96	96	92 ²	95	95	92	84	89	92	89	88	88	83	80
The effective number of IPC nurses ≥ 90% of the funded number (expressed in number of FTE)	92	92	100	100	100	100	100	100	96	98	94	92	96 ²	100	100	100	78	89	89	89	92	92	83	96
Presence of referents for infection control	92	100	100	100	100	100	100	86	94	98	98	100	100	100	100	100	100	100	100	100	100	100	100	96
Number of referents in ICU / number of ICU ≥ 1	92	100	100	100	100	100	86	57 ¹	87	94 ¹	96	100	100	100	98	92	97 ¹	95 ¹	97 ¹	97 ¹	96 ¹	96 ¹	96 ¹	92 ¹
Number of referents in units (including ICU) / number of units (including ICU) ≥ 1	83	100	92	92	100	100	71	71 ¹	76	87	91	91	92	90	88	84	95	97	95	91	92	92	92	76 ¹
Mean proportion	88	93	93	95	98	100	89	80	89	95	95	96	96	97	96	94	91	94	95	93	94	94	91	88

FTE, fulltime equivalent; ICU, intensive care unit; IPC, infection prevention and control; n, number of hospitals

¹This indicator was not applicable in 1 hospital, ²The financed number of FTEs was missing for 1 hospital

Table 3 • Median and percentile 25 and 75 for the three numeric quality indicators in Belgian hospitals belonging to the resource indicator group, national level, 2015-2022

Indicator Description	Brussels							Flanders							Wallonia									
	2015 n=12	2016 n=12	2017 n=12	2018 n=12	2019 n=12	2020 n=6	2021 n=7	2022 n=7	2015 n=54	2016 n=54	2017 n=54	2018 n=53	2019 n=50	2020 n=41	2021 n=41	2022 n=37	2015 n=37	2016 n=37	2017 n=37	2018 n=37	2019 n=35	2020 n=26	2021 n=24	2022 n=25
Number of hours for training on IPC provided by the IPC team to the hospital staff, per funded number of FTE for IPC (physicians and nurses)	35 (23-36)	31 (26-38)	34 (25-48)	34 (24-56)		45 (37-124)	21 (9-77)	62 (11-563)	19 (11-41)	18 (12-29)	20 (12-26)	15 (10-34)	18 (11-32)	33 (13-70)	16 (9-37)	15 (8-31)	20 (13-28)	19 (12-33)	19 (11-31)	18 (12-28)	17 (12-33)	37 (15-79)	17 (12-58)	21 (11-48)
Number of participants in these trainings, per funded number of FTE for IPC (physicians and nurses)	250 (160-393)	360 (241-443)	419 (235-608)	31 (22-45)	347 (190-492)	410 (286-431)	173 (74-318)	162 (68-366)	266 (152-384)	311 (146-500)	299 (244-468)	238 (140-404)	295 (153-452)	276 (168-661)	221 (107-452)	208 (118-336)	205 (105-313)	146 (99-238)	151 (107-287)	140 (93-318)	130 (53-305)	233 (67-460)	142 (87-254)	120 (71-228)
Number of hours of e-learning training on IPC followed by the hospital staff, per funded number of FTE for IPC (physicians and nurses).			435 (209-470)	0 (0-4.4)	0 (0-6)	1.2 (0-20)	0 (0-105)	0 (0-52)			2 (0-91)	0.2 (0-57)	19 (0-99)	14 (0-77)	49 (0-135)	63 (8-148)			0 (0-0.5)	0 (0-0)	0 (0-19)	0 (0-35)	0 (0-38)	0 (0-105)

FTE, full time equivalents; IPC, infection prevention and control; n, number of hospitals

Table 4 • Median and percentile 25 and 75 for the number of beds per IPC professional and the proportion (%) of Belgian hospitals for the minimal and higher ratio's defined by the WHO, national level, 2015-2022

Indicator Description	Brussels								Flanders								Wallonia							
	2015 n=12	2016 n=12	2017 n=12	2018 n=12	2019 n=11	2020 n=6	2021 n=7	2022 n=6	2015 n=54	2016 n=54	2017 n=51	2018 n=49	2019 n=47	2020 n=38	2021 n=34	2022 n=30	2015 n=35	2016 n=37	2017 n=36	2018 n=33	2019 n=30	2020 n=22	2021 n=19	2022 n=20
Number of beds per full-time equivalent IPC professional (nurse or doctor) (median + IQR)	216 (113 - 302)	258 (151 - 326)	220 (114- 288)	298 (152 - 338)	290 (127 - 324)	152 (120 - 291)	300 (122 - 366)	177 (122 - 219)	204 (157 - 298)	211 (149 - 316)	214 (157 - 301)	213 (164 - 305)	226 (161 - 336)	237 (178 - 316)	237 (191 - 317)	188 (155 - 229)	201 (104 - 257)	199 (128 - 264)	199 (130 - 268)	214 (113 - 271)	190 (106 - 263)	188 (104 - 238)	178 (107 - 313)	136 (105 - 198)
Number of beds per full-time equivalent IPC professional (nurse or doctor) ≤250 (proportion of hospitals)	50%	50%	50%	33%	36%	67%	43%	50%	63%	59%	59%	61%	60%	55%	53%	63%	74%	68%	67%	67%	70%	77%	74%	95%
Number of beds per full-time equivalent IPC professional (nurse or doctor) ≤100 (proportion of hospitals)	8%	0%	17%	0%	0%	0%	14%	0%	7%	7%	6%	4%	6%	3%	0%	10%	20%	16%	8%	15%	17%	18%	16%	25%

FTE, full time equivalents; IPC, infection prevention and control; n, number of hospitals

Table 5 • Proportion (%) of Belgian hospitals meeting each individual activity indicator for the indicators also collected in all previous data sets, regional, 2015 - 2022

Indicator Description	Brussels Year (n)									Flanders Year (n)							Wallonia Year (n)							
	'15 (12)	'16 (12)	'17 (12)	'18 (12)	'19 (12)	'20 (6)	'21 (7)	'22 (7)	'15 (54)	'16 (54)	'17 (54)	'18 (53)	'19 (51)	'20 (41)	'21 (41)	'22 (37)	'15 (37)	'16 (37)	'17 (37)	'18 (37)	'19 (35)	'20 (56)	'21 (24)	'22 (25)
1. Meetings																								
Participation of the management in the meetings of the IPC Committee	100	100	92	100	100	100	100	100	91	94	96	96	100	95	100	97	97	100	97	97	94	100	100	100
Participation of the infection control team in the meetings of the regional platform for IPC	100	83	100	100	83	100	100	100	89	89	96	94	96	98	100	100	97	100	95	100	100	100	100	100
2. Surveillances																								
MRSA (local)	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
MRSA (national)	100	100	100	100	100	100	100	100	100	100	98	100	100	100	100	100	100	100	100	100	94	85	96	100
Bloodstream infections (local)	100	100	100	100	100	100	100	100	100	100	98	100	100	100	98	100	100	100	97	100	100	96	100	96
Bloodstream infections (national)	100	100	100	100	100	100	100	100	100	100	96	100	100	100	98	100	97	97	97	100	94	92	96	96
Multi-resistant Gram-negative bacteria (local)	100	100	100	100	100	100	100	100	100	100	98	100	100	100	100	100	100	100	100	100	100	96	100	100
Multi-resistant Gram-negative bacteria (national)	100	100	100	100	100	100	100	100	100	100	96	100	100	98	100	100	97	100	100	100	94	81	100	96
Toxicogenic <i>Clostridioides difficile</i> infections (local)	100	100	92	100	100	100	100	100	100	100	98	100	100	100	100	100	95	95	100	100	94	96	96	96
Infections in Intensive Care Units (local)	58	75	58	75	50	33	57	57	83	85	89	89	88	88	88	86	49	51	51 ¹	54 ¹	54 ¹	65 ¹	63 ¹	60 ¹
Surgical site infections (local)	58	67	50	33	42	33	29	43	50	57	69	66	73	66	68	73	19	32	46 ¹	57 ¹	49 ¹	50 ²	42 ¹	48 ¹
Vancomycin-resistant enterococci (local)	100	100	100	100	100	100	100	71	94	94	93	96	98	100	95	95	92	97	97	100	100	100	100	100
Other surveillances (local)		67	58	67	50	83	71	86		76	74	77	73	71	80	89		51	62	62	60	54	58	72
Presence of a systematic interaction between the laboratory and the IPC team (warning system)	100	100	100	100	100	100	100	100	98	100	100	100	100	100	100	100	97	97	97	100	100	100	100	96
3. Process audits																								
Audit of the procedure for the prevention of central line-associated bloodstream infections (CLABSI)	58	67	50	83	83	67	43	57	54	69	54	74	90	73	76	86	68	78	57	78	86	73	67	68
Audit of the procedure for the prevention of catheter-	67	58	67	67	67	67	71	71	39	57	50	70	78	68	71	76	70	81	68	81	80	62	79	84

Indicator Description	Brussels Year (n)									Flanders Year (n)						Wallonia Year (n)								
	'15 (12)	'16 (12)	'17 (12)	'18 (12)	'19 (12)	'20 (6)	'21 (7)	'22 (7)	'15 (54)	'16 (54)	'17 (54)	'18 (53)	'19 (51)	'20 (41)	'21 (41)	'22 (37)	'15 (37)	'16 (37)	'17 (37)	'18 (37)	'19 (35)	'20 (56)	'21 (24)	'22 (25)
associated urinary tract infections (CAUTI)																								
Audit of the procedure for the prevention of infections related to invasive mechanical ventilation	42	42	25 ¹	42	42	33	43	43	76	80	63	66	82	59	78	78	57	57	30 ¹	57 ¹	83 ¹	46 ¹	83	80
Audit of the procedure for the prevention of SSI	67	67	33	58	50	50	43	57	46	44	43	57	61	42	57	57	32	38	22 ¹	51 ¹	55 ¹	38 ¹	50 ¹	60
Other audits related to IPC	75	75	67	83	67	33	57	71		46	76	79	86	83	90	97		81	57	41	40	42	63	60
4. National campaign/prevalence study																								
Participation in the national campaign "You're in good hands".	100	100	100	100	92	/	71	/	98	96	98	100	96	/	/	/	89	95	100	97	100	/	75	/
Local audits related to hand hygiene compliance (outside the national campaign)	100	100	75	83	83	67	71	71	89	83	87	87	90	78	89	89	68	76	84	78	77	62	63	96
At least 150 hand hygiene opportunities (outside the national campaign) have been reported.	100	100	67	75	83	67	71	57	69	76	70	81	71	63	70	70	43	62	81	70	69	50	54	72
Mean proportion	86	86	81	85	81	78	79	80	85	85	85	85	88	90	85	90	67	78	88	84	83	76	81	90

CLABSI, central line-associated bloodstream infections; MRSA, Methicillin-resistant *Staphylococcus aureus*; n, number of hospitals; SSI, surgical site infections; CAUTI, catheter-associated urinary tract infections; IPC, infection prevention and control

¹This indicator was not applicable in 1 hospital, ²This indicator was not applicable in 2 hospitals

Table 6 • Proportion (%) of Belgian hospitals meeting each individual activity indicator for the indicators collected since 2018, national, 2017 - 2022

Indicator Description	Brussels					Flanders					Wallonia				
	2018 n=12	2019 n=12	2020 n=6	2021 n=7	2022 n=7	2018 n=53	2019 n=51	2020 n=41	2020 n=41	2022 n=37	2018 n=37	2019 n=35	2020 n=26	2021 n=24	2022 n=25
3. Process audits															
Approach for optimizing the choice of venous vascular access	92	92	83	71	100	74	78	83	83	89	76	83	88	88	88
Procedure for the prevention of central line-associated bloodstream infections	100	92	83	71	86	98	100	100	100	100	89	94	92	92	100
Procedure for the prevention of catheter-associated urinary tract infections	92	92	83	86	86	89	94	98	98	97	92	94	96	96	100
Procedure for the prevention of infections related to invasive mechanical ventilation	83	100	100	71	86	94	96	93	95	97	81 ¹	83 ¹	81 ¹	83 ¹	80 ¹
Procedure for the prevention of surgical site infections	83	82	83	86	100	87	90	90	90	92	81 ¹	77 ¹	73 ¹	79 ¹	84 ¹

Indicator Description	Brussels					Flanders					Wallonia				
	2018 n=12	2019 n=12	2020 n=6	2021 n=7	2022 n=7	2018 n=53	2019 n=51	2020 n=41	2020 n=41	2022 n=37	2018 n=37	2019 n=35	2020 n=26	2021 n=24	2022 n=25
4. National campaign/ prevalence study															
Participation in the point prevalence study related to HAI and antimicrobial use	33	67	50	43	86	47	59	27	49	95	43	74	31	54	100
5. Other															
Information for the patient regarding the risk of infections	75	83	83	100	100	100	96	98	93	100	95	97	96	96	96
Approach for the prevention of accidental blood exposure	100	100	100	100	100	100	100	100	100	100	97	97	92	92	100
Procedure for the management of accidental blood exposure	100	100	100	100	100	100	100	100	100	100	97	97	96	100	96
An influenza vaccination campaign for staff	100	100	100	100	100	98	100	100	100	100	100	100	100	100	100
Participation of the IPC team in the medical devices committee meetings	100	100	100	100	100	98	98	98	98	97	97	97	92	100	96
Participation of the IPC physician in the antimicrobial stewardship group meetings	100	75	67	86	71	100	100	98	100	100	97	100	100	100	96
Procedure for antibiotic prophylaxis in surgery	83	100	83	86	57	100	100	100	100	97	78 ¹	89 ¹	92 ¹	88 ¹	84 ¹
Audit of the procedure for antibiotic prophylaxis in surgery	25	17	0	14	43	66	73	44	61	68	46 ¹	66 ¹	42 ¹	38 ¹	40
Participation in the antibiotic prophylaxis in surgery audit from BAPCOC	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Procedure for the prevention of contact/droplet/airborne transmission	100	100	100	100	86	100	100	100	100	100	95	100	100	100	100
Audit of the procedure for the prevention of contact/droplet/airborne transmission	75	92	50	86	57	89	96	88	85	95	70	83	73	71	84
Procedure to prevent transmission by screening of patients	92	100	100	86	100	94	98	100	100	100	100	100	54	100	100
Audit of the procedure to prevent transmission by screening of patients	58	75	33	43	57	83	86	85	83	84	54	63	54	46	68
Procedure related to admission of patients who are known MDRO carriers	92	83	100	86	100	96	98	100	98	100	97	100	96	100	100
Audit of the procedure related to admission of patients who are known MDRO carriers	33	50	33	29	43	89	86	80	76	89	49	57	50	42	56
Procedure for the disinfection of endoscopes	92	100	100	100	100	96	100	100	100	100	87	97	96	96	100
Procedure for the disinfection of endocavity ultrasound probes	83	100	100	86	100	75 ²	78	83	90	95	89	94 ¹	96	96	100
Audit of the procedure for the disinfection of endocavity ultrasound probes	25	42	33	14	43	42 ²	51	29	39	49	89	37 ¹	35	58	52
A preventive approach regarding the transmission of tuberculosis	100	100	100	100	100	100	100	100	100	100	92	91	92	92	88
A preventive approach regarding the risk of Creutzfeldt Jacob disease	75	83	83	86	100	79	86	95	85	89	81	83	81	92	96
An approach to prevent the risk of infection related to the management of construction works	83	92	100	100	100	98	98	100	98	100	92	89	92	96	96
An approach to prevent the risk of infection related to the cleaning and disinfection of surfaces and non-medical equipment	92	92	83	86	86	100	100	100	100	100	100	94	100	100	100
An approach to prevent the risk of infection related to the cleaning and disinfection of non-critical medical materials	92	100	100	100	100	98	98	100	98	100	89	91	96	96	100
Risk management plan with regard to the distribution of warm water for sanitary purposes	92	83	67	100	100	100	100	98	100	100	76	94	81	92	100
Procedure to prevent the risk of infection in operating rooms and rooms for interventional techniques	75	83	67	86	86	98	100	98	98	97	81 ¹	80 ¹	77 ¹	79 ¹	88

Indicator Description	Brussels					Flanders					Wallonia				
	2018 n=12	2019 n=12	2020 n=6	2021 n=7	2022 n=7	2018 n=53	2019 n=51	2020 n=41	2020 n=41	2022 n=37	2018 n=37	2019 n=35	2020 n=26	2021 n=24	2022 n=25
Audit of the procedure to prevent the risk of infection in operating rooms and rooms for interventional techniques	50	50	33	43	43	64	78	54	51	68	43 ¹	40 ¹	35 ¹	50 ¹	48
Procedure to prevent the risk of infection in delivery rooms	67 ¹	58 ²	33 ²	57 ¹	71 ¹	83	86 ¹	93	90	97	68 ³	63 ³	58 ⁴	63 ³	56 ⁵
Audit of the procedure to prevent the risk of infection in delivery rooms	17 ¹	17 ²	17 ²	0 ¹	43	49	59 ¹	56	51	51	24 ³	26 ³	19 ⁴	21	12
Mean proportion	78	82	74	80	83	86	90	88	88	93	80	83	80	82	90

BAPCOC, *Belgian Antibiotic Policy Coordination Committee*; MDRO, multidrug resistant organisms; n, number of hospitals; IPC, infection prevention and control; HAI, health care associated infections

¹This indicator was not applicable in 1 hospital, ²This indicator was not applicable in 2 hospitals, ³This indicator was not applicable in 5 hospitals, ⁴This indicator was not applicable in 4 hospitals,

⁵This indicator was not applicable in 6 hospitals

Table 7 • Median and percentile 25 and 75 in % for the two numeric quality indicators in Belgian hospitals belonging to the activity indicator group, national level, 2018-2022

Indicator Description	Brussels					Flanders					Wallonia				
	2018 n=12	2019 n=12	2020 n=6	2021 n=7	2022 n=7	2018 n=53	2019 n=51	2020 n=41	2021 n=41	2022 n=37	2018 n=37	2019 n=35	2020 n=26	2021 n=24	2022 n=25
Staff vaccination coverage for influenza	23% (15% - 36%)	23% (21% - 34%)	55% (39% - 87%)	20% (14% - 66%)	18% (14% - 38%)	63% ¹ (54% - 70%)	67% ¹ (60% - 76%)	77% (68% - 81%)	71% ² (65% - 79%)	52% ² (46% - 61%)	29% ¹ (17% - 36%)	32% ¹ (19% - 41%)	28% (19% - 40%)	30% (20% - 35%)	19% (12% - 27%)
Number of observed hand hygiene opportunities (outside the national campaign)	958 (300 - 1613)	1725 (904 - 2749)	620 (308 - 1058)	454 (300 - 1076)	948 ² (356 - 1251)	541 (187 - 1105)	665 (150 - 1588)	327 (151 - 923)	345 (165 - 900)	473 ³ (150 - 1407)	432 (181 - 1009)	318 (169 - 1036)	160 (150 - 186)	222 (190 - 1343)	201 ¹ (126 - 1102)

n, number of hospitals;

¹This indicator was missing for 1 hospital, ²This indicator was missing for 2 hospitals, ³ This indicator was missing for 4 hospitals

Table 8 • Proportion (%) of Belgian hospitals meeting the process indicator, national, 2018-2022

Indicator Description	Brussels					Flanders					Wallonia				
	2018 n=12	2019 n=12	2020 n=6	2021 n=7	2022 n=7	2018 n=53	2019 n=51	2020 n=41	2021 n=41	2022 N=37	2018 n=37	2019 n=35	2020 n=26	2021 n=24	2022 n=25
Hand rub consumption (litres/1,000 hospitalisation days) ≥ mean in 2016 (24.7 litres/1,000 hospitalisation days)	67	75	100	86	57	51	59	95	83	65	22	43	85	71	44

n, number of hospitals

Table 9 • Median and percentile 25 and 75 for the alcohol-based hand consumption (in litres/1,000 hospitalisation days) in care wards in Belgian hospitals, national level, 2015-2022

Indicator Description	Brussels									Flanders							Wallonia									
	2015 n=12	2016 n=12	2017 n=12	2018 n=12	2019 n=12	2020 n=6	2021 n=7	2022 n=7	2023 n=7	2015 n=54	2016 n=55	2017 n=54	2018 n=53	2019 n=51	2020 n=41	2021 n=41	2022 n=37	2023 n=37	2015 n=37	2016 n=37	2017 n=37	2018 n=37	2019 n=35	2020 n=26	2021 n=24	2022 n=25
Hand rub consumption, median	25.1 (20.8 - 34.6)	30.7 (23.6 - 41.2)	33.6 (24.5 - 44.6)	33.2 (20.0 - 50.4)	34.6 (24.9 - 49.7)	59.4 (47.0 - 103)	43.4 (26.9 - 52.6)	24.7 (21.3 - 45.6)	24.7 (21.3 - 45.6)	21.5 (18.2 - 28.3)	23.5 (18.0 - 31.4)	24.1 (19.6 - 38.2)	24.7 (21.0 - 37.7)	27.0 (21.3 - 44.2)	62.6 (37.4 - 83.8)	41.1 (32.8 - 55.6)	26.9 (21.4 - 38.5)	26.9 (21.4 - 38.5)	19.6 (16.6 - 25.2)	17.4 (15.7 - 22.2)	20.5 (17.5 - 24.5)	21.0 (15.4 - 24.5)	23.2 (17.2 - 32.7)	35.7 (29.4 - 47.6)	29.4 (23.3 - 42.2)	23.4 (18.6 - 31.4)

n, number of hospitals

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